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FEB - 4 2014 T CLINE

COVER LETTER

	istration Section ision of Corporations		
SUBJECT:	8885 SE Harbor Island Way, LLC		
	Name of Limited Liability Company	•	
The enclosed	Articles of Organization and fee(s) are submitted for filing.		
Please return	all correspondence concerning this matter to the following:		
	Mark Tepsich		
	Name of Person		
**=	RMS Investment Group, LLC		
	Firm/Company		
****	50 Public Square, Ste. 1600		-
	Address	26	2014
	Cleveland, OH 44113 City/State and Zip Code		FEB -
	mtepsich@rmscorporations.com		ω
	E-mail address: (to be used for future annual report notification)		Tables 1
For further in	formation concerning this matter, please call:		22
Mark Tep	sich at (216) 592-1321 Name of Person Area Code Daytime Telephone Number		
	•		
٦	check for the following amount:		
\$1 25.00 Filir	rg Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Fi Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified Conditional copy is enclosed)	of Status Copy	

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
8885 SE Harbor Island Way, LLC	
(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
50 Public Square, Ste. 1600 Cleveland, OH_44113	50 Public Square, Ste, 1600 Cleveland, OH 44113
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as another business entity with an active Florida reprint the name and the Florida street address of the re	its own Registered Agent. You must designate an individual or gistration.)
CT Corporation Sys	stem
	Name
1200 South Pine Isl	and Road
Florida street address (P	O. Box NOT acceptable)
Plantation	FL33324
City	Zip
the place designated in this certificate, I hereb capacity. I further agree to comply with the pro	ccept service of process for the above stated limited liability company at ty accept the appointment as registered agent and agree to act in this visions of all statutes relating to the proper and complete performance t the obligations of my position as registered agent as provided for in Chapter 605, F.S
1	Diane Stout, Asst. Secretary
Sur Stre	L
Registered Agent'	s Signature (REQUIRED)
(CON	NTINIEN)

Page 1 of 2

2014 FEB -3 MM 1: 22

Ellen Ratner 50. Public Square, Ste. 1600	<u>Title:</u>	Name and Address:
Ellen Ratner 50. Public Square, Ste. 1600 Cleveland, OH 44113 EV: Effective date, if other than the date of filing: (OPTIONAL) ctive date is listed, the date must be specific and cannot be more than five business days prior to or of filing. EVI: Other provisions, if any. REQUIRED SIGNATURE: (In accordance with section 605.203 (1) (b), Florida Statues, the execution of this documer constitutes an affirmation under the penalties of pripry that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Ellen Ratner Typed or printed name of signee Filing Fees:	"AMBR" = Authorized Member	
Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Ellen Ratner Typed or printed name of signee Filing Fees: S125.00 Filing Fees:	"MGR" = Manager	
Cleveland, OH. 44113 Use attachment if necessary) E. V: Effective date, if other than the date of filing:	MGR	Ellen Ratner
Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Ellen Ratner Typed or printed name of signee Filling Fees:		50 Public Square, Ste. 1600
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